



**City of Lakeland**  
**10001 Highway 70**  
**Lakeland, TN 38002**  
**901.867.2717**

## **APPLICATION FOR EMPLOYMENT**

The City of Lakeland is an equal opportunity employer and administers decisions related to employment without regard to race, color, creed, national origin, religion, age, sex, disability, veteran's status, genetic information, or any other basis prohibited by federal, state, and/or local laws.

**Complete the application in its entirety. There should be requested information in all blanks rather than comments that only refer to attached materials, such as "see resume." Print all responses and sign the application upon completion.**

### **PERSONAL DATA**

Applicant's name (first, middle, last): \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_ City/State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone Number(s) (include area code): \_\_\_\_\_

Are you legally authorized to work in the United States? Yes \_\_\_\_\_ No \_\_\_\_\_

Have you ever been convicted of a felony? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, explain and include date(s):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(A conviction will not automatically disqualify an applicant from employment.)

Application for (position) \_\_\_\_\_ Date available to begin employment \_\_\_\_\_

### **EMPLOYMENT HISTORY**

My present employer \_\_\_\_\_ may be contacted \_\_\_\_\_ may not be contacted.

Provide all employment information starting with the most recent position.

Employer: \_\_\_\_\_ Position held: \_\_\_\_\_

Address: \_\_\_\_\_ Telephone #: \_\_\_\_\_

Immediate supervisor and title: \_\_\_\_\_

Dates employed: from \_\_\_\_\_ to \_\_\_\_\_ Salary: \_\_\_\_\_

Brief description of your work and responsibilities: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

\_\_\_\_\_

Employer: \_\_\_\_\_ Position held: \_\_\_\_\_  
Address: \_\_\_\_\_ Telephone #: \_\_\_\_\_  
Immediate supervisor and title: \_\_\_\_\_  
Dates employed: from \_\_\_\_\_ to \_\_\_\_\_ Salary: \_\_\_\_\_  
Brief description of your work and responsibilities: \_\_\_\_\_  
\_\_\_\_\_  
Reason for leaving: \_\_\_\_\_  
\_\_\_\_\_

Employer: \_\_\_\_\_ Position held: \_\_\_\_\_  
Address: \_\_\_\_\_ Telephone #: \_\_\_\_\_  
Immediate supervisor and title: \_\_\_\_\_  
Dates employed: from \_\_\_\_\_ to \_\_\_\_\_ Salary: \_\_\_\_\_  
Brief description of your work and responsibilities: \_\_\_\_\_  
\_\_\_\_\_  
Reason for leaving: \_\_\_\_\_  
\_\_\_\_\_

Employer: \_\_\_\_\_ Position held: \_\_\_\_\_  
Address: \_\_\_\_\_ Telephone #: \_\_\_\_\_  
Immediate supervisor and title: \_\_\_\_\_  
Dates employed: from \_\_\_\_\_ to \_\_\_\_\_ Salary: \_\_\_\_\_  
Brief description of your work and responsibilities: \_\_\_\_\_  
\_\_\_\_\_  
Reason for leaving: \_\_\_\_\_  
\_\_\_\_\_

## EDUCATIONAL HISTORY

High School: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Graduate: Yes \_\_\_\_\_ No \_\_\_\_\_  
Address: \_\_\_\_\_  
If no, do you have a General Educational Development (G.E.D.)? Yes \_\_\_\_\_ No \_\_\_\_\_

College: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Graduate: Yes \_\_\_\_\_ No \_\_\_\_\_  
Major: \_\_\_\_\_ Degree Received: \_\_\_\_\_ Address: \_\_\_\_\_

Graduate School: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Graduate: Yes \_\_\_\_\_ No \_\_\_\_\_  
Major: \_\_\_\_\_ Degree Received: \_\_\_\_\_ Address: \_\_\_\_\_

Technical school: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Graduate: Yes \_\_\_\_\_ No \_\_\_\_\_  
Major/Area of Specialty: \_\_\_\_\_ Address: \_\_\_\_\_

## OTHER SKILLS AND QUALIFICATIONS

Summarize any training, skills, licenses, certifications, and/or other qualifications related to the job for which you are applying: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## REFERENCES (OTHER THAN RELATIVES)

List names, addresses, and telephone numbers of three (3) references and specify relationship.

1. \_\_\_\_\_  
\_\_\_\_\_
2. \_\_\_\_\_  
\_\_\_\_\_
3. \_\_\_\_\_  
\_\_\_\_\_

**Note: Attach an additional sheet if necessary to fully complete any of the information requested above. Print your name at the top of the sheet, date, and sign.**

I fully understand that in signing this application for employment, I hereby authorize the potential employer to contact, obtain, and verify the accuracy of information contained in this application from all previous employers, educational institutions, and/or references. I also hereby release from liability the potential employer and its representatives for seeking, gathering, and using such information to make employment decisions and all other persons or organizations for providing such information.

I agree for the City of Lakeland to review my background and to obtain a consumer report and/or investigative consumer report under the provisions of the Fair Credit Reporting Act (FCRA).

I understand that the City of Lakeland has adopted a Smoke-Free Workplace Policy in accordance with state law (Public Chapter 410, Non-Smoker Protection Act) and a Drug-Free Workplace and agree to abide by applicable policies and requirements if employed.

I understand that any falsified information and/or misrepresentation or omission of material facts, even if unintentional and/or inadvertent, may result in refusal of employment or, if employed, termination of employment, whenever it may be discovered.

If I am employed, I acknowledge that there is no specified length of employment and that this application does not constitute an agreement or contract for employment. Accordingly, either the employer or I can terminate the relationship at-will, with or without cause, at any time and for any reason or no reason, so long as there is no violation of applicable federal, state, or local law.

If I am employed, I will provide documents verifying my employment eligibility, as required by the Immigration Reform and Control Act (IRCA).

I understand that a medical examination may be required for employment.

I certify that the information provided on this application is true and correct. I agree to provide background releases and any documents verifying information included in this application, as required. I have read and I understand the contents of this application, and I seek employment based on that understanding.

**Applicant's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_